

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date:: 02/04/2004  
Application Type: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
Title:: EXPATRIATE ASSOCIATE  
SELECTION PROCESS  
Attorney Docket Number:: HON 1448-049  
Request for Early Publication?:: No  
Request for Non-Publication?:: Yes  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 2  
Small Entity?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship  
Country:: USA  
Status:: Full capacity  
Given Name:: Pamela  
Family Name:: Jones-Morton  
City of Residence:: Dublin  
Country of Residence:: USA  
Street of mailing address:: 7618 Caspersan Court  
City of mailing address:: Dublin  
State or Province of

Mailing address:: Ohio  
Country of Mailing  
Address: USA  
Postal or Zip code of  
Mailing address:: 43017

Applicant Authority Type:: Inventor  
Primary Citizenship  
Country:: USA  
Status:: Full Capacity  
Given Name:: Cheryl  
Family Name:: Layman  
City of Residence:: Delaware  
Country of Residence:: USA  
Street of mailing address:: 1666 Penry ARoad  
City of mailing address:: Delaware  
State or Province of  
Mailing address:: Ohio  
Country of Mailing  
Address: USA  
Postal or Zip code of  
Mailing address:: 43015

Applicant Authority Type:: Inventor  
Primary Citizenship  
Country:: USA  
Status:: Full Capacity  
Given Name:: Charles E.  
Family Name:: Richardson  
City of Residence:: Dublin

Country of Residence:: USA  
Street of mailing address:: 7170 Innisfree Lane  
City of mailing address:: Dublin  
State or Province of  
Mailing address:: Ohio  
Country of Mailing  
Address: USA  
Postal or Zip code of  
Mailing address:: 43017

### Correspondence Information

#### Correspondence Customer

Number:: 08698  
Phone number:: (614) 792-5555  
Fax number:: (614) 792-5536  
E-Mail address:: [jstandley@standleyandgilcrest.com](mailto:jstandley@standleyandgilcrest.com)

### Representative Information

|                                     |       |  |
|-------------------------------------|-------|--|
| Representative Customer<br>Number:: | 08698 |  |
|-------------------------------------|-------|--|

### Domestic Priority Information

|                  |                         |                      |                      |
|------------------|-------------------------|----------------------|----------------------|
| Application::    | Continuity Type::       | Parent Application:: | Parent Filing Date:: |
| This application | Continuation-in-part of | 10/113,342           | 03/29/2002           |

## Assignment Information

|                           |                           |
|---------------------------|---------------------------|
| Assignee Name::           | Honda Motor Co., Ltd.     |
| Street of mailing         |                           |
| Address::                 | 1-1, Minamiaoyama 2-chome |
| City of mailing address:: | Tokyo                     |
| State or Province of      |                           |
| Mailing address::         | Minato-ku                 |
| Country of mailing        |                           |
| Address::                 | Japan                     |
| Postal or Zip Code of     |                           |
| Mailing address::         | 107-8556                  |